

# Position Description

Read each heading carefully before proceeding. Make statements simple, brief, and complete. Be certain the form is signed. Send the original to the Division of Personnel Services.

CHECK ONE: ☐ NEW POSITION ☒ X EXISTING POSITION

## Part I - Items 1 through 12 to be completed by department head or personnel office.

|   |   |  |                                     |  |                  |                    |
|---|---|--|-------------------------------------|--|------------------|--------------------|
| 1. Agency Name<br>Department for Children and Families  |   | 9. Position No.<br>K0069987  | 10. Budget Program Number 23842     |  | Agency<br>Number |                    |
| 2. Employee Name (leave blank if position vacant)   |   | 11. Present Class Title (if existing position)<br>Human Service Consultant |                                     |  |                  |                    |
| 3. Division<br>East Region  |   | 12. Proposed Class Title   |                                     |  |                  |                    |
| 4. Section<br>Strategic Operations  | For<br><br>Use<br><br>By<br><br>Personnel<br><br>Office | 13. Allocation   |                                     |  |                  |                    |
| 5. Unit<br>EES Performance Improvement  |   | 14. Effective Date   |                                     |  |                  |                    |
| 6. Location (address where employee works)<br><br>City Topeka County Shawnee                    |   | 15. By   | Approved                            |  |                  |                    |
| 7. (circle appropriate time)<br>Full timeX Perm. Inter.<br>Part time Temp. %                    | Personnel   | 16. Audit<br>Date: By:<br>Date: By:  |                                     |  |                  |                    |
| 8. Regular hours of work: (circle appropriate time)<br><br>FROM: 8:00a.m AM/PM To: 5:00pm AM/PM |   | Office   | 17. Audit<br>Date: By:<br>Date: By: |  |                  |                    |
|   |   |  |                                     |  |                  | Position<br>Number |

## PART II - To be completed by department head, personnel office or supervisor of the position.

18. If this is a request to reallocate a position, briefly describe the reorganization, reassignment of work, new function added by law or other factors which changed the duties and responsibilities of the position.

19. Who is the supervisor of this position? (Who assigns work, gives directions, answers questions and is directly in charge.)

| Name | Title | Position Number |
|------|-------|-----------------|
|------|-------|-----------------|

|              |                                       |           |
|--------------|---------------------------------------|-----------|
| Anita Cooper | Performance Improvement Administrator | K01214702 |
|--------------|---------------------------------------|-----------|

Who evaluates the work of an incumbent in this position?

| Name | Title | Position Number |
|------|-------|-----------------|
|------|-------|-----------------|

20. a) How much latitude is allowed employee in completing the work? b) What kinds of instructions, methods and guidelines are given to the employee in this position to help do the work? c) State how and in what detail assignments are made.

The HSC works very independently and is allowed much latitude in decision making and policy application. The employee receives all relevant manuals, Secretary and Commissioner letters and policy clarification. General instructions are given by The Administrator of Performance Improvement and/or Human Services Supervisor (HSS) and EES Program Administrator. Specific instructions are not usually given unless requested by the HSC.

21. Describe the work of this position using the page or one additional page only. (Use the following format for describing job duties:)

**What** is the action being done (use an action verb); to **whom** or **what** is the action directed (object of action) ; **why** is the action being done (be brief); **how** is the action being done (be brief). For each task state: Who reviews it? How often? What is it reviewed for?

| Number Each Task and Indicate Percent of Time | <p><b><u>PROFESSIONAL ATTITUDE:</u></b> While performing the tasks listed below, please remember that you are a representative of the Department for Children and Families, and you are expected to:</p> <ul style="list-style-type: none"> <li>*Demonstrate a willingness to help. Remember that your customer is anyone needing or asking for your assistance. For example, this could be other agency employees, community partners, landlords, state and community partners, and individuals and families seeking services from the agency;</li> <li>*Demonstrate an attitude of respect (i.e be attentive to the customer, communicate in a polite and professional tone of voice, meet with the customer, or return phone calls or emails within a reasonable period of time – as defined by your supervisor or program policy), process requests for service as quickly as possible;</li> <li>*Encourage individuals to identify and fulfill their own responsibilities;</li> <li>*Practice personal self-discipline and maintain ethical and professional behavior in times of frustration with difficult customers;</li> <li>*Provide information and service to those seeking your assistance. If you are unable to directly provide that service or information, you should offer to connect them with someone who can assist or advise them.</li> </ul> <p><b>Failure to demonstrate a professional attitude will directly reflect on the organization, the quality of service you provide, and will be considered unacceptable for any employee of the East Region DCF.</b></p>   |
|---|--|
| 45% E   | <p><u>Program Monitoring</u></p> <p>Assists in conducting case read reviews through an established protocol, in order to monitor compliance with policy and procedures and to assure appropriate service delivery. Completes the mandated case reviews, documents findings which includes making recommendations concerning areas of policy, training, program efficiencies and effectiveness by following established protocols. Develops and updates protocols and other monitoring tools to assist staff in meeting federal and state mandates. Acts as liaison to appropriate Program Administrators and Central Office personnel in gathering data, establishing corrective action plans and other activities as needed. Sets up and participates in entrance and exit conferences related to the case reviews.</p> <p>Case reviews are performed through investigation of the customers circumstances through the use of available computer information systems, research of records provided by customers, community resources, and when necessary, home visits provide information upon which eligibility decisions are based. Using East Region protocol, Reviewers will examine the hard copy case file. They will also research KAECSES and all related computer data and analyze the impact on individual cases. Have a working knowledge of community agencies and resources available to the East Region. Resolve all conflicts between federal and state policies and resolve conflicts between agency, client and collateral information. Records results on East Region approved form and / or data bank (correct, incorrect, dollar amount) including documented reasons for error and substantiating state program manual reference. Decides independently, or with the aid of immediate supervisor, correctness of each factor of eligibility in multiple programs. Evaluate results to determine impact on customers.</p> |
| 25% E   | <p><u>Program Compliance</u></p> <p>Assists with the development, implementation and evaluation of corrective action plans in conjunction with East Region Performance Improvement Administrator , East Region Program Administrators and Central Office personnel by performing further case reviews, assisting with the development and delivery of training and policy implementation and analysis of appropriate data. Provides specific knowledge and feedback regarding program information as a means to provide quality services to customers. Evaluates and monitors the results of the implemented corrective action plans collaborating with Performance Improvement Assistant Director, NE Region Program Administrators and Central Office personnel in order achieve the needed outcomes</p>   |
| 10% E   | <p><u>Program Reporting</u></p> <p>Conferences are conducted with appropriate individuals to share protocols and results of reviews. Comprehensive written reports are prepared utilizing fundamental accounting principles, knowledge of Federal and State policies and procedures and a high level of communication skill. Conferences and reports</p>   |

|       |  |
|-------|--|
|       | are to provide performance results of the regions' outcomes  |
| 10% E | <u>Program Collaboration</u><br>Collaborates with ISD and PI staff as well as Central office staff in the development of training and other initiatives , in order to assure that new and current staff have knowledge of program policies and procedures related to service delivery. Participates in the coordination of integrated training development and delivery, report analysis, compliance results for East Region protocols , as well as, works integrally with Performance Improvement Administrator, East Region Program Administrators and Central Office personnel to insure efficiencies and effectiveness are achieved in the East Region, focusing on the implementation of performance criteria which results in positive outcomes. |
| 10% M | Other duties as assigned which could include covering for other program areas during times of crisis.  |

22. a. If work involves leadership, supervisory, or management responsibilities, check the statement which best describes the position.
- ( X ) Lead worker assigns, trains, schedules, oversees, or reviews work of others.
- ( ) Plans, staffs, evaluates, and directs work of employees of a work unit.
- ( ) Delegates authority to carry out work of a unit to subordinate supervisors or managers.

- b. List the names, class titles, and position numbers of all persons who are supervised directly by employee on this position.

**Title**

**Position Number**

23. Which statement best describes the results of error in action or decision of this employee?

- ( ) Minimal property damage, minor injury, minor disruption of the flow of work.
- ( ) Moderate loss of time, injury, damage or adverse impact on healthy and welfare of others.
- ( X ) Major program failure, major property loss, or serious injury or incapacitation.
- ( ) Loss of life, disruption of operations of a major agency.

Please give examples.

24. For what purpose, with whom and how frequently are contacts made with the public, other employees or officials?

This position involves daily contact with agency customers, agency employees, other social service agencies, community resource agencies, government officials, and the general public in order to determine assistance eligibility for customers. Makes referrals to and disseminates information regarding State and Federal regulations as agency programs, policy and procedures.

25. What hazards, risks or discomforts exist on the job or in the work environment?

The position may encounter hostile, angry, or upset people when dealing with issues of eligibility for assistance. Long period of time may be spent on a computer and various computer systems. A high level of stress may exist in the determination of eligibility due to the limitations of the programs and resources to effectively resolve the customers need for help. Upon occasion, physical harm may be threatened or attempted by hostile, angry or upset customers.

26. List machines or equipment used regularly in the work of this position. Indicate the frequency with which they are used.

Computers, telephones systems, copy machines are used daily. Positions will require the use of a vehicle (private or state owned) in traveling to offices to provide case reviews and services to customers.

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**PART III - To be completed by the department head or personnel office**

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27. List in the spaces below the minimum amounts of education and experience which you believe to be necessary for an employee to begin employment in this position.

Five years of experience interviewing, investigating, compiling information, documenting decisions, interpreting guidelines and/or providing technical assistance relevant to the agency's programs. Post secondary education may be substituted for experience as determined relevant by the agency.

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Education or Training - Special or professional

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License, certificates and registrations

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Special knowledge, skills and abilities

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Experience - Length in years and kind

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**28. SPECIAL QUALIFICATIONS**

State any additional qualifications for this position that are necessary either as a physical requirement of an incumbent on the job, a necessary special requirement, a bona fide occupational qualification (BFOQ) or other requirement that does not contradict the education and experience statement on the class specification. A special requirement must be listed here in order to obtain selective certification.

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Signature of Employee

Date

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Signature of Personnel Official

Date

**Approved:**

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Signature of Supervisor

Date

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Signature of Agency Head or  
Appointing Authority

Date